

Advisory Committee on Trauma meeting
February 18, 2004
Minutes

Attending: Dr. Paul Harrison, Dr. Scott Sellers, Dr. Brent Rody, Jack Shearer, Robert Orth, Connie Meyer, Debra Pile, Pat Dowlin, Lois Towster, Pam Kemp, Mark Bradford, Chris Way, and Kerry McCue

Absent: Senator Wagle, Senator Haley, Representative Morrison, Representative Showalter, Leanne Irsik, Kimberla Nutting, Dr. Dennis Allin, Dr. Craig Concannon and Roger John,

Meeting called to order by Chairperson Dr. Harrison and the minutes of the November 19, 2003 meeting were approved.

Trauma Program update:

Rosanne introduced Cindy Rosebrook, who will be working with Kendra at the Kansas Foundation for Medical Care. Cindy previously worked at KDOT in the Bureau for Traffic Safety. The contract with KFMC was amended to provide funds for the additional FTE to assist regions with development of regional trauma plans.

Sherry Davis has turned in her resignation to pursue other interests. Sherry will be leaving in March. The success of the trauma registry is owed greatly to the efforts of Sherry. The Bureau of Health Care Information will be actively recruiting for a replacement.

Rosanne reported on the federal EMS/Trauma meeting she attended in January. The ATS is developing a fact sheet for each state including the story of someone whose life was saved due to the resources of a trauma center. South Carolina used grant funds to develop a multi-media campaign to increase awareness and support for trauma centers in their state. The tape from South Carolina was shared with the group.

Washington State has agreed to serve as a mentor for Kansas in development of the statewide trauma system. Washington State has used their registry data for PI. They also recently changed their state criteria for the trauma registry to include all injured children admitted to the hospital.

The Society of Nurses has received a HRSA grant to assist with providing their performance improvement class in states. The earliest performance improvement class that Kansas would be eligible to participate would be in 2005. It was recommended that the registry data be further developed before performance improvement activities can be pursued. Rosanne will look into the possibility of a class later in 2005.

Trauma System development is an important link with Homeland Security and BT. Kansas is one of several states not to have the trauma system as a part of our BT grant. Dr. Concannon

was recently appointed by the Governor as the ACT representative to the Bioterrorism planning committee.

American College of Surgeons provides a Consultation Program for Trauma Systems. Several of the states have utilized grant funds for this project. It is a similar process as to the hospital verification except it's a review of the state system. The benefit would be in utilizing an independent agency is easier for some to swallow than when review is done by peers. It is an expensive process in excess of \$30,000.

The ACS has also developed a new course titled, "Rural Trauma course". Via Christi has one scheduled in April in Wichita. Dr. Tom Foley spoke about the program at the NE meeting last spring. Kendra e-mailed a power point presentation on it to those who requested one.

EMS/Trauma grant is due at the end of March. This will be the last of the three-year grant.

The newsletter from Digital Innovations was shared with the ACT. Last year's meeting was held in Nashville Tennessee. Three people from Pratt County went to conference and found it to be very useful. Digital Innovations was encouraged to hold this year's conference in the Midwest due to the number of users in the area. This year's conference will be in Denver.

Trauma Education:

Several of the regions have requested that trauma education classes be listed at a central location. Its difficult to look at various hospital web sites to find what trauma programs may be offered. In an effort to provide a centralized location, Linda Frazier with KDHE workforce development will provide an overview of the Kansas TRAIN system.

The regions have requested a PowerPoint presentation that can be utilized by the regions in doing education among their members. The message needs to be consistent and concise. The NE has developed a presentation. It is currently 90 slides, which will be reviewed. This may be too long for the target audience. A subcommittee was appointed to review a presentation, which can be utilized by the regional chairs. Those agreeing to review include: Mark Bradford, Dr. Blow, Rosanne Rutkowski, and Jack Shearer. The NE has several presentations scheduled so a short turn around time is necessary.

Resource Assessment Survey:

The subcommittee appointed at the November ACT meeting met Feb. 4th to discuss the survey. Due to weather, the group meet via phone conference. Members include: Rosanne, Dr. Blow, Melissa Hungerford, Dr. Harrison, Dr. Allin, Kimberla Nutting, and Leanne Irsik. The draft as proposed by this committee was distributed for discussion. Dr. Rody suggested that the survey be accepted as developed. Several of the regional representatives wanted time to review. It was suggested that a definition guide be developed to ensure that everyone understands the questions in the same manner. A definition guide will be developed by Rosanne and Cindy. It will be distributed to the committee for review and final approval. Once approved the survey and guide will be distributed to the regional chairs, and representatives. There was discussion as to the best

way to collect the survey information. Each region will need to make the decision as to the best way to administer. Cindy will be available to help with the process. The purpose of the survey is to help hospitals assess what resources they have in regards to care of the trauma patient and to incorporate the information into a regional plan of care.

Board EMS Update:

David Lake asked that the committee remember those whose lives were lost in the Dodge City air plane crash that occurred yesterday. Health care in Kansas suffered a big loss.

David reported on those bills that the Board of EMS is following in the legislature. He provided a handout of those bills. **Please see attached memo.**

The subject of background checks on felons has come up at the last couple of meetings. The Board of EMS is asking the KMS to get involved with this issue. KMS could be an ally on any legislative efforts that we take. Right now the hiring agency finds out what the felony was, checks to see if they have completed their requirements and asks for three letters of recommendations. Service directors want more information about these applicants.

David Lake reported on a conference he attended recently at KU. They reported on the benefits of a tracking system by which such things as West Nile virus and global warming effect on wheat production are monitored. The Health and Human services and Senate committees need to hear those types of presentations as well as information similar to the S. Carolina video.

Dick reported that next year we should request a time to present a comprehensive briefing to the legislature on the trauma system. A presentation should be developed which can be utilized by various members to make the pitch to their legislator. David Lake reported that he is aware of a legislator from SE Kansas who speaks very highly of the EMS system based on his experience recently.

EMD Committee Report:

The EMD subcommittee met earlier in January to develop recommendations as to the best way to proceed with the EMD training. Members included: John Hayworth, Chris Way, David Lake, Terry David, Tim Pitts, Kendra and Rosanne. The group came up with the following 4 recommendations and requested action by the ACT:

1. National Standard for EMD dispatching is recommended as the acceptable standard in Kansas.
2. Regions will develop a plan to address and identify EMD issues in their area based on survey results and additional suggested questions. A baseline by the RTC will be established describing status of emergency medical dispatch training and education. The plan and quarterly updates will be provided to the ACT and other funding sources.

3. Funding will be provided to regions through a central source. It is recommended that a particular commercial vendor not be endorsed as long as the commercial program can document meeting national standards.
4. The plan developed by each of the regions addressing EMD education and training will be a part of their regional trauma plan. Regional trauma councils will monitor the goals established in their plan to increase the number of EMD providers/instructors and it will be included as part of the quarterly reporting.

Kerry McCue made the motion that the ACT accepts the recommendations as written. Chris Way seconded motion with all in favor.

The turnover among EMD staff is constant so training will need to be ongoing. Medical Priorities has one teacher for all of Kansas. Terry recommended that we have more than one qualified trainer in the state. Train the trainer would be an acceptable plan of action by the regions. The biggest issue to dispatch supervisors is the cost involved. The cost is currently \$295 per student for tuition plus housing and costs for staff coverage while the student is at class. Rosanne reported that Debra Williams with the KDHE C-V grant program has stated an interest in this project and has federal funds available which can be used for dispatch training. This is a one time opportunity for the emergency medical dispatch to enhance training. There was discussion as to how the funding may be divided among regions.

Trauma Education:

A letter from the “Consortium for the improvement of Trauma Education” to Richard Morrissey was provided to the group. CITE has provided notice that as of June 30, 2004 they will be terminating their contract. Melissa explained as in the letter the education needs of the regions has evolved. KHA will work with KDHE until a new plan is developed and a vendor identified. Jack Shearer commended Melissa for her work on this project and asked that she consider applying when the new RFP is developed. Rosanne recommended that the education chairs from each of the six regions be part of the subcommittee to work on the next RFP. Please see handout of education chairs. They include 3 hospital members, 3 EMS members and 2 health department members. Members of the ACT who volunteered to serve on this committee included Lois Towster who will serve as the liaison and Melissa Hungerford. Leanne Irsik was recommended by Melissa to also serve. It was also recommended that David Lake serve on the committee. A motion was made by Robert Orth to develop a plan as presented. Motion seconded by Lois Towster and passed unanimously. [See Trauma Education Chart](#)

Trauma Registry:

Sherry Davis reported on the status of the trauma registry. The infrastructure is in place for data reporting. There are but a handful of hospitals that are not reporting or have not expressed an interest in implementing the registry. The list of those facilities was provided to the group. Discussion as to what can be done to encourage reporting. [See list of hospitals.](#)

The next Kansas Trauma Registry Subcommittee meeting has been scheduled for March 9th in Wichita at Via Christi. Reporting back to the facilities and regions is going to be a priority. The KTRS will need to decide what the mechanism is for providing reports back to the hospital. Consideration in the future should be given to collecting data on all injured children into the registry that are admitted to a hospital regardless of the 48 hour rule.

Data Compliance report will cover all of the fields contained in the state's core data set and will note the percentage of cases reported with complete answers. An sample report was reviewed where it was noted that 397 of 398 cases reported in January 2003 were complete in reporting patient age. In other data fields, the completeness report will contain a summary of the answers and reporting percentages in addition to the number and percent of answers that were blank or incorrect. The report is seen as a tool hospitals can use to educate others within their facility on the need to obtain the data. Standard reports issued to RTC, ACT and KTR subcommittee will be the format for the standard reports hospitals will receive. Hospitals will not see just their report but will be able to compare their report with others on a regional or state basis. How often these reports will be prepared needs to be decided.

Digital Innovations has established their own data pool of Collector users. Consideration is currently being given to providing data to the NTDB through contract with Collector.

Training:

There has been turnover at the hospital level among staff doing data entry for the registry. Sherry currently has a list of 10 to 15 people who need to be trained. In the past, KDHE has provided training at locations statewide. This was expensive and time consuming. We will be looking at providing web based training in the future or doing trainings at a central location.

Software Update:

Per requests of hospital users, there have been recommended changes to the Collector Software. There are 5 hospitals in the state that have agreed to be a test site for changes to the software. They are: Hays, Newton, Providence, Via Christi and Wesley. Final plans for the software update will be distributed to hospitals as of March 19, 2004. The changes to the software will become part of the data dictionary. Hospitals will receive new data dictionary contents once the change has been made and finalized.

Data Reporting:

The reporting deadlines for 2004 are March 30, May 31, August 30 and November 30.

Central Site Registry:

The central site trauma registry currently has 6,300 patients in the database. This first year has been provisional in regards to data collection. 2004 will be the first full year of data reporting. We had 39 additional facilities trained in November.

TRAIN Education System:

Linda Frazier, Public Health Workforce Development Coordinator for KDHE, gave a demonstration on a learning management system, TRAIN. This system can be utilized for

promotion of trauma classes in Kansas. TRAIN is a learning opportunity for health professionals. Over 20 states are signed up as affiliates. Courses are provided in several forms including: on-line, in person, over the internet, and satellite downlinks.

Regional Trauma Council Reports:

The regional representatives provided reports for each of the six regions. Terry David provided a report for Tim Pitts from the SC who was unable to attend. The NW report was provided by Rosanne for Kim Nutting who was ill. **See attached RTC reports for November to February activities.**

Other:

Dick announced the BT coordinating council and the Hospital Planning preparedness council has been combined per federal guidelines. Governor Sebelius issued an executive order to abolish both committees and create a new group with members appointed from each. Dr. Concannon will continue to serve as the ACT representative to the new group.

Meeting adjourned by Dr. Harrison at 2:15pm. Next meeting scheduled May 19, 2004



K A N S A S

DENNIS ALLIN, M.D., CHAIR
DAVID LAKE, ADMINISTRATOR

BOARD OF EMERGENCY MEDICAL SERVICES

KATHLEEN SEBELIUS, GOVERNOR

memorandum

DATE: February 18, 2004
TO: Advisory Committee on Trauma
FROM: DAVID LAKE
RE: Legislative Update

The following bills, with a brief description, are those with some level of interest to the Board of EMS and perhaps to this committee. They are all currently active in the legislative arena. You can follow the action taken on these bills by accessing the Legislative web-site at www.kslegislature.org/

Sub.SB153 - Wireless E-911

SB312 - Funding source for the Board of EMS

SB329 - Child Passenger Safety Restraint Bill

SB332 - Change name of First Responder to Emergency Medical Responder.

SB351 - Establishment of EMS Educational Fund

SB362 - Primary Seat Belt Law

SCR1616 - KDOT Communications Plan

HB2522 - Infra-Red Traffic Signal Controller

HB2686 - Change name of First Responder i.e. SB332

HB2729 - House version of Primary Seat Belt law

HB2756 - KDOT bill to provide equipment leasing service for Public Safety agencies

HB2832 - Temporary Certification

TNCC

	2002	2003
No. of Courses	11	29
No. of Rural Students	104	265
Average Cost Per Student	\$ 213.76	\$ 214.86

	NC	NE	NW	SC	SE	SW
No. of Courses	4	7	4	7	4	3
No. of Rural Students	46	53	51	45	33	37
Average Cost Per Student	\$ 181.38	\$ 225.72	\$ 217.76	\$ 208.05	\$ 219.31	\$ 240.27

PHTLS

	2002	2003
No. of Courses	4	13
No. of Rural Students	66	126
Average Cost Per Student	\$ 172.75	\$ 158.86

	NC	NE	NW	SC	SE	SW
No. of Courses	0	4	2	1	3	3
No. of Rural Students	0	*26	37	20	** 16	27
Average Cost Per Student	\$ -					

ATLS

	2002	2003
No. of Courses	2	6
No. of Rural Students	31	26
Average Cost Per Student	\$ 751.35	\$ 638.84

	NC	NE	NW	SC	SE	SW
No. of Courses	0	1	1	4	0	0
No. of Rural Students	0	*-not avail.	14	12	0	0
Average Cost Per Student						

* - Waiting on paperwork from Lois

** - Waiting on paperwork from Cindy

Note: The average cost per student is based on the total expenses for the course divided by the total number of students that attended the course

Kansas Hospitals
Not Yet Trained on the Registry System
February, 2004

NW Region

Decatur County Hospital
Logan County Hospital
Rush County Memorial Hospital

Oberlin
Oakley
LaCrosse

SE Region

Oswego Health Center

Oswego

SC Region

St. Lukes Hospital

Marion

NE Region

Morris County Hospital
Cushing Memorial Hospital
Jefferson County Memorial Hospital

Council Grove
Leavenworth
Winchester

NC Region

Lincoln County Hospital
Smith County Memorial Hospital

Lincoln
Smith Center

Regional Trauma Council Update

November 2003 – February 2004

NWRTC

An Executive Committee Meeting was held on January 28, 2004 at the Hays Medical Center.

- By-laws
 - The Committee developed a finance policy regarding the process by which expenditures would be approved.
 - Staff Education/Prevention
 - The Committee feels that more pediatric trauma education is needed in their region.
 - EMS Education
 - The Committee has discussed the need for more training on the Glasgow Coma Scale and the Revised Trauma Scale in order for this information to be recorded in the hospital trauma registry data. A sample run form that includes the trauma registry data will be distributed to EMS in the region that they can modify or adopt if they wish.
 - Old Business
 - Regional Trauma Plan Development
 - Dr. Schultz (NWRTC Chair) mailed a letter to the general membership about regional trauma plan development and the need for help in completing the plan.
 - The Committee agreed that meeting with hospital personnel face-to-face would be the best way to ensure that the proper data was collected on the survey tool.
 - Communications
 - The Committee plans to submit articles about the NWRTC to medical publications such as the EMS Chronicle on a quarterly basis. An article regarding the trauma registry was placed in the EMS Chronicle in December. Plans are to include an article in an upcoming Region 16 nursing newsletter.
 - New Business
 - General Membership Meeting: April 29, 2004, from 10:00 to 2:00, at the Hays Medical Center (Hadley Rooms 2 & 3).
 - Gary Curmode, Chief of the Sedgwick County Fire Department District #1, will be the featured speaker at the General Membership Meeting. Chief Curmode was in charge during the 1998 DeBruce Grain Elevator explosion in June 1998.
 - A brochure and registration form will be distributed to the general membership as invitation.
 - The next Executive Committee meeting will be on April 29, 2004 prior to the General Membership meeting, from 8:00 until 9:00am.
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SWRTC

An Executive Committee meeting was held on January 20, 2004, at the Western Plains Medical Complex in Dodge City.

- Ad hoc Budget Update
 - The Committee discussed a policy for approval of expenditures.
- Prevention/Education
 - A PowerPoint presentation with regional survey results is being developed for the General Membership meeting in April.
 - The Committee requested that a letter be mailed to EMS services and hospitals to gain information regarding their education and trauma contact persons.
- Communications
 - The sub-committee will conduct the telephone survey that the ACT developed to assess EMD training needs in their region.
- Regional Trauma Plan Development will be added as a standing agenda item.
- Injury Prevention will be a new Sub-Committee
 - The Committee discussed collaborating with other agencies doing prevention efforts such as local SAFE KIDS chapters and the Kansas Highway Patrol.
- The SWRTC General Membership meeting will be held on April 13, 2004, in Garden City at St. Catherine.
 - Dr. Stephen Smith will present on trauma case studies describing what worked and what did not work.
 - The meeting will be from 9:00 – 12:00 with lunch being served at 12:00.

SCKTR

An Executive Committee meeting was held on January 22, 2004 at the Rice County EMS.

- Staff Education
 - A trauma system PowerPoint presentation will be developed to help members inform hospitals, EMS agencies, and health departments in their region of the SCKTR council and the trauma plan development.
 - Injury Prevention
 - Two people have shown interest in being involved in this sub-committee and perhaps chairing. They were invited to attend the next Executive Committee meeting.
 - By-laws
 - A finance policy was discussed to approve expenditures.
 - SCKTR General Membership meeting will be held on June 11, 2004 at Via Christi in Wichita, from 10:00 to 1:00pm.
 - The next SCKTR Executive Committee meeting is on April 15, 2004, at 12:00pm at the Hutchinson Hospital.
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